

Programme approval visit report

Section one

Programme provider name:	University of Edinburgh
In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i>	NHS Lothian Sodexo Justice Services, Addiewell Prison NHS Borders Spire, Spire Murrayfield Hospital Spire Healthcare Ltd, Spire Shawfair Hospital NHS Scotland, The State Hospital Peacock Medicare Ltd, Woodlands Nursing Home
Programme(s) reviewed:	
<p>Programme: Independent and Supplementary Nurse Prescribing Title of programme: Prescribing for nurses and health professionals Programme start date: 7 September 2020</p> <p>Academic level(s): SCQF: Level 11</p>	
Date of approval	6 February 2020
QA visitor(s):	Registrant Visitor: Mark Lovatt

Section two

Summary of review and findings

Edinburgh University (EU) is an approved education institution (AEI) and has a history of delivering pre-registration nursing programmes. This is the first time they're presenting a prescribing programme for approval. EU is seeking to deliver the independent and supplementary nurse prescribing (V300) programme. This is a conjoint approval between the NMC and the university quality assurance board against the Nursing and Midwifery Council (NMC) Standards for prescribing programmes (NMC, 2018) and the Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) competency framework for all prescribers) (NMC, 2018). The V300 programme is part-time and delivered over a period of six months. It uses a blended learning approach and leads to 40 credits at academic level 11. It can be studied as a standalone programme or be integrated into other masters level qualifications.

Documentary evidence submitted by the university and subsequent discussion at the approval visit demonstrates commitment towards partnership working with students, practice learning partners (PLPs) and service users and carers (SUCs) relating to pre-registration nursing programmes, with evidence of active and effective engagement at operational and strategic levels. However, findings at this approval visit are insufficient to provide assurance the same level of partnership with stakeholders extends to the prescribing programme. Arrangements in place to oversee practice learning do not meet the Standards framework for nursing and midwifery education (SFNME) or the Standards for student supervision and assessment (SSSA).

The recommendation is to refuse approval of the programme. There are six NMC conditions. The AEI made one condition. Conditions are:

Condition one: The AEI must provide a strategy and implementation plan to ensure recruitment, ongoing development, delivery and evaluation of the programme is co-produced with SUCs and other stakeholders. (SFNME R1.12; Standards for prescribing (SPP) R2.1)

Condition two: The AEI must provide details of admission processes and procedures which support self-employed applicants applying for entry onto an NMC approved prescribing programme. (SFNME R2.3; SPP R1.2, R1.3)

Condition three: The AEI must provide details of the audit process and outline how this will be implemented for practice learning placements for NHS, non-NHS and self-employed applicants. (SFNME R2.13; SSSA R1.4, R1.10, R2.4, R2.5; SPP R1.3, R3.1, R3.2)

Condition four: The AEI must provide details of the schedule and programme of preparation for practice assessors and practice supervisors which ensures these individuals are suitably prepared to support applicants to the prescribing programme. (SFNME R2.4, R2.5, R2.14; SSSA R5.1, R6.7, R8.1; SPP R1.3, R3.2, R4.2)

Condition five: The AEI must provide documentary evidence confirming practice learning partners adopt an approach with shared responsibility for quality theory and practice supervision, learning and assessment, including lines of communication and accountability for the development, delivery, quality assurance and evaluation of the prescribing programme. (SFNME R2.5; SPP R2.1, R4.1, R4.2)

Condition six: The AEI must provide a single comprehensive document that provides the essential information required to undertake the programme. (SFNME R3.2; SPP R2.1)

Condition seven: To be approved by the school board of studies, the proposed course must be academically appropriate and meet the approval requirements of the NMC. (University condition)

Recommended outcome of the approval panel	
Recommended outcome to the NMC:	Recommended to refuse approval of the programme
Recommendations to enhance the programme delivery:	None identified
Focused areas for future monitoring:	None identified

Programme is recommended for approval subject to specific conditions being met	
Commentary post review of evidence against conditions: N/A	
AEI Observations	Observations have been made by the education institution Yes
Summary of observations made, if applicable	No specific observation to be made on the recommendations. We accept the report, outcome and conditions.
Final recommendation made to NMC:	
Date condition(s) met:	N/A

Section three

NMC Programme standards
<p>Please refer to NMC standards reference points</p> <p><u><i>Standards for prescribing programmes (NMC, 2018)</i></u></p> <p><u><i>Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers) (NMC, 2018)</i></u></p> <p><u><i>Standards framework for nursing and midwifery education (NMC, 2018)</i></u></p> <p><u><i>Standards for student supervision and assessment (NMC, 2018)</i></u></p> <p><u><i>The Code: Professional standards of practice and behaviour for nurses and midwives (NMC, 2015)</i></u></p> <p><u><i>QA framework for nursing, midwifery and nursing associate education (NMC, 2018)</i></u></p>

Partnerships

The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders

Please refer to the following NMC standards reference points for this section:

Standards framework for nursing and midwifery education (NMC, 2018)

Standard 1: The learning culture:

R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders

R1.13 work with service providers to demonstrate and promote inter-professional learning and working

Standard 2: Educational governance and quality:

R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders

R2.4 comply with NMC Standards for student supervision and assessment

R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes

R2.6 ensure that recruitment and selection of students is open, fair and transparent and includes measures to understand and address underrepresentation

R2.7 ensure that service users and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection

Standard 3: Student empowerment:

R3.3 have opportunities throughout their programme to work with and learn from a range of people in a variety of practice placements, preparing them to provide care to people with diverse needs

R3.16 have opportunities throughout their programme to collaborate and learn with and from other professionals, to learn with and from peers, and to develop supervision and leadership skills

R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning

R3.18 have opportunities throughout their programme to give feedback on the

quality of all aspects of their support and supervision in both theory and practice

Standard 4: Educators and assessors:

R4.7 liaise and collaborate with colleagues and partner organisations in their approach to supervision and assessment

R4.9 receive and act upon constructive feedback from students and the people they engage with to enhance the effectiveness of their teaching, supervision and assessment

R4.10 share effective practice and learn from others

Standard 5: Curricula and assessment:

R5.4 curricula are developed and evaluated by suitably experienced and qualified educators and practitioners who are accountable for ensuring that the curriculum incorporates relevant programme outcomes

R5.5 curricula are co-produced with stakeholders who have experience relevant to the programme

R5.14 a range of people including service users contribute to student assessment

Standards for student supervision and assessment (NMC, 2018)

Standard 1: Organisation of practice learning:

R1.4 there are suitable systems, processes, resources and individuals in place to ensure safe and effective coordination of learning within practice learning environments

R1.7 students are empowered to be proactive and to take responsibility for their learning

R1.8 students have opportunities to learn from a range of relevant people in practice learning environments, including service users, registered and non-registered individuals, and other students as appropriate

Standard 2: Expectations of practice supervisors:

R2.2 there is support and oversight of practice supervision to ensure safe and effective learning

Standard 3: Practice supervisors: role and responsibilities:

R3.3 support and supervise students, providing feedback on their progress towards, and achievement of, proficiencies and skills

Standard 4: Practice supervisors: contribution to assessment and progression:

R4.3 have sufficient opportunities to engage with practice assessors and academic assessors to share relevant observations on the conduct, proficiency and achievement of the students they are supervising

Standard 7: Practice assessors: responsibilities:

R7.9 communication and collaboration between practice and academic assessors is scheduled for relevant points in programme structure and student progression

Standard 9: Academic assessors: responsibilities:

R9.6 communication and collaboration between academic and practice assessors is scheduled for relevant points in programme structure and student progression

Findings against the standard and requirements

Provide an evaluative summary about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders based on QA visitor (s) documentary analysis and discussions at the approval visit, taking into consideration the QA approval criteria

Documentary evidence demonstrates there's collaboration between PLPs and the AEI at strategic and operational levels to oversee pre-registration nursing programmes. There's evidence the AEI works in partnership with a range of PLPs to assure public safety and protection using regionally agreed processes and practices. Whilst these documents provide evidence of a general intent to share responsibility and work in partnership, it is not evident how this philosophy applies to the V300 programme. There is no documentary evidence to indicate any partnership meetings take place with regards to the prescribing programme. During the visit and consulting with PLPs and SUCs, it is evident there is no obvious or sustained philosophy of partnership in place with regards to the prescribing programme. One strategic level and two operational level PLP representatives attended the visit. These representatives tell us the AEI has not contacted them to discuss joint working arrangements to develop the programme and its contents. PLPs tell us they are not aware of proposed programme delivery methods, length of programme or governance arrangements for the programme. PLPs tell us they are not assured the programme suitably prepares students to prescribe in terms of programme duration and content. (Condition one) (SFNME R1.12; SPP R2.1)

Whilst there's some evidence of PLP collaborative working regarding pre-registration nursing programmes and co-operation with quality assurance measures such as audit, nothing specific to the prescribing programme is identified. There's no evidence confirming how EU and PLPs share responsibility for theory and practice supervision, learning and assessment. This includes lines of communication and accountability for the development, delivery, quality assurance and evaluation of the prescribing programme. (Condition five) (SFNME R2.5; SPP R2.1, R4.1, R4.2)

PLP representatives tell us they wish to work with the university to co-produce the programme and work in partnership. PLPs present can't provide evidence or outline their role in recruitment to the programme. PLPs are unable to confirm organisation of practice learning or how practice assessors and practice supervisors are being prepared to undertake their roles in supervising, supporting and assessing students undertaking the V300 prescribing programme. PLPs can't provide evidence of how they will provide effective support for practice supervisors

or practice assessors and students on the prescribing programme. (Condition four) (SFNME R2.4, R2.5; SSSA R5.1, R6.7, R8.1; SPP R1.3, R3.2, R4.2)

SUCs say they're recently asked by the university to help with nursing programmes and are positive about this initiative. SUCs can't tell us how they're engaged with the prescribing programme and state they're not consulted about its development, delivery or review processes. (Condition one) (SFNME R1.12; SPP R2.1).

SUCs tell us they want to contribute if they're approached by the programme team. SUCs can't tell us about any strategies in place to enable and encourage them to be fully involved in student recruitment process for the prescribing programme.

Students, from post-graduate programmes in advanced practice, tell us they're not involved with this programme but are aware EU plans to develop a prescribing qualification. Students can't say how practice areas will support them in practice regarding the SSSA as the programme they study does not have these requirements. Students tell us EU is supportive and they're aware how to raise concerns in line with EU's escalating concerns policy.

Students tell us they are satisfied with the level of support they receive from EU and are enjoying the post registration courses they're enrolled on. The programme team do not say how they have engaged with students in producing this programme. There's no clear structure in place to promote a partnership approach to programme co-production with PLPs, SUCs or students.

Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 1: Standards framework for nursing and midwifery education

Not Met

There's no evidence of effective partnerships indicating PLPs, service users or students are involved in the design, development, delivery or co-production of this programme.

PLPs present can't provide narrative evidence, or outline their role, in confirming how practice assessors and practice supervisors are being prepared to undertake their roles in supervising, supporting and assessing students undertaking the V300 prescribing programme.

There's no evidence confirming how EU and PLPs share responsibility for theory and practice supervision, learning and assessment. This includes lines of communication and accountability for the development, delivery, quality assurance

and evaluation of the prescribing programme.

Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 2: Standards for student supervision and assessment

Not Met

PLPs present can't provide narrative evidence, or outline their role, in confirming how practice assessors and practice supervisors are being jointly prepared with EU to undertake their roles in supervising, supporting and assessing students undertaking the V300 prescribing programme.

If not met, state reason

There's no evidence of effective partnerships indicating PLPs, service users or students are involved in the design, development, delivery or co-production of this programme.

Condition one: The AEI must provide a strategy and implementation plan to ensure recruitment, ongoing development, delivery and evaluation of the programme is co-produced with SUCs and other stakeholders. (SFNME R1.12; SPP R2.1)

PLPs present can't provide narrative evidence, or outline their role, in confirming how practice assessors and practice supervisors are being prepared to undertake their roles in supervising, supporting and assessing students undertaking the V300 prescribing programme.

Condition four: The AEI must provide details of the schedule and programme of preparation for practice assessors and practice supervisors which ensures these individuals are suitably prepared to support applicants to the prescribing programme. (SFNME R2.4, R2.5, R2.14; SSSA R5.1, R6.7, R8.1; SPP R1.3, R3.2, R4.2)

There's no evidence confirming how EU and PLPs share responsibility for theory and practice supervision, learning and assessment. This includes lines of communication and accountability for the development, delivery, quality assurance and evaluation of the prescribing programme.

Condition five: The AEI must provide documentary evidence confirming practice learning partners adopt an approach with shared responsibility for quality theory and practice supervision, learning and assessment, including lines of communication and accountability for the development, delivery, quality assurance and evaluation of the prescribing programme. (SFNME R2.5; SPP R2.1, R4.1,

R4.2)

Post Event Review

Identify how the condition is met:

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

Student journey through the programme

Standard 1 Selection, admission and progression

Approved education institutions, together with practice learning partners, must:

R1.1 ensure that the applicant is a registered nurse (level 1), a registered midwife or a SCPHN before being considered as eligible to apply for entry onto an NMC approved prescribing programme

R1.2 provide opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non- NHS employed registrants) to apply for entry onto an NMC approved prescribing programme

R1.3 confirm that the necessary governance structures are in place (including clinical support, access to protected learning time and employer support where appropriate) to enable students to undertake, and be adequately supported throughout, the programme

R1.4 consider recognition of prior learning that is capable of being mapped to the RPS Competency Framework for all Prescribers

R1.5 confirm on entry that any applicant selected to undertake a prescribing

programme has the competence, experience and academic ability to study at the level required for that programme

R1.6 confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas:

R1.6.1 Clinical/health assessment

R1.6.2 Diagnostics/care management

R1.6.3 Planning and evaluation of care

R1.7 ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme

Note: Education institutions and their practice learning partners may propose to transfer current students onto the new programme to meet the Standards for prescribing programmes and Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers). If so, evidence must be provided to support this proposed transfer as part of the education institution's mapping process at Gateway 3.

Evidence provides assurance that the following QA approval criteria are met

Evidence of processes to ensure that the applicant is a registered nurse (level 1), a registered midwife or a SCPHN before being considered as eligible to apply for entry onto an NMC approved prescribing programme (R1.1)

Yes

Evidence of selection process that demonstrates opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non-NHS employed registrants) to apply for entry onto an NMC approved prescribing programme. Evidence of this statement in documentation such as: programme specification; module descriptor, marketing material. Evidence of this statement on university web pages (R1.2)

No

There's no evidence of PLP involvement in selection process or process outlining

how self-employed applicants are signed off as competent in diagnosis. (Condition two) (SFNME R2.3; SPP R1.2, R1.3)

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

Evidence that the necessary governance structures are in place (including clinical support, access to protected learning time and employer support where appropriate) to enable students to undertake, and be adequately supported throughout, the programme (R1.3)

Not Met

R1.3 not met. Documentary evidence confirms a documentary application process is in place. An application form is used to provide information about the suitability of registered nurses to undertake the programme. Applicants must have employer support and service managers must confirm the applicant's clinical competence, their capability in practice and give assurance practice learning time will be protected. Students must identify who will be their practice supervisor and practice assessor on application to the programme. This is stated on the application form. However, PLPs say they're not aware of the application process for this programme. (Condition two) (SFNME R2.3; SPP R1.2, R1.3)

The programme team tell us they intend to prepare practice supervisors and practice assessors prior to the commencement of the programme. Documentary and narrative evidence does not provide assurance as to how practice supervisors or practice assessors receive preparation or how they will receive ongoing support from the programme team or the PLPs as this process is not yet explained to them. EU can't provide details of materials used to prepare practice supervisors or practice assessors or explicit details of how they will monitor their level of preparedness. There's no timeline of scheduled preparation events or evidence of a strategy to identify future practice supervisors and practice assessors. The programme team tell us all practice supervisors and practice assessors are invited to a briefing session about the programme on the first day of the programme but are unable to provide any detail about briefing session contents. It is not evident what will happen if practice supervisors or practice assessors do not attend. It is unclear if preparation is a one-off event or if individuals are required to undertake on-going update. (Condition four) (SFNME R2.4, R2.5, R2.14; SSSA R5.1, R6.7, R8.1; SPP R1.3, R3.2, R4.2)

A timeline is required for updating and a process outlining how practice supervisors and practice assessors are notified if, and when, an update to their preparation is required.

The programme team don't make clear medical practitioners need to undertake practice assessor preparation. Programme documentation includes a process

outlining how they evidence prior learning meaning medical practitioners do not have to undertake any preparation for the role of practice assessor. This does not provide the necessary assurance they are suitably prepared to support students on the prescribing programme, and this does not meet the SSSA. The programme team tell us they provide students with details of who will be their academic assessor and the nominated person in practice. All applications are reviewed by the programme lead.

There's no evidence of a process sufficient to ensure equity of student experience and provide assurance practice experiences are safe, effective and inclusive for this programme. The programme team tell us they intend to use an audit tool, and this is completed by employers and service managers. The team can't provide this tool for scrutiny. The practice learning environment quality tool given as an example relates to pre-registration nursing programmes and is not applicable to this programme. (Condition three) (SFNME R2.13; SSSA R1.4, R1.10, R2.4, R2.5; SPP R1.3, R3.1, R3.2)

For non-NHS and self-employed applicants, the programme team tell us these areas will perform a practice area self-audit with a proportion subsequently being audited by the programme lead. The programme team can't provide documentary evidence of the self-audit process to be used or explicit details about how the audit process will be applied to non-NHS practice placements and self-employed applicants. (Condition three) (SFNME R2.13; SSSA R1.4, R1.10, R2.4, R2.5; SPP R1.3, R3.1, R3.2)

The admission process for self-employed applicants asks for manager approval with signed confirmation that applicants will be supported and for appropriate governance arrangements in place to develop them. This is not always possible for self-employed applicants and may not have a line manager. There is no other verification process in place for self-employed applicants who work independently and the programme team can't verify these applicants are supported in the same way as NHS applicants. EU must provide details of processes and procedures to support self-employed applicants applying for entry onto the prescribing programme. (Condition two) (SFNME R2.3; SPP R1.2, R1.3)

Processes are in place to consider recognition of prior learning that is capable of being mapped to the RPS Competency Framework for all Prescribers (R1.4)

Yes

Processes are in place to confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme (R1.5)

Yes

Processes are in place to confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas (R1.6):

- Clinical/health assessment**
- Diagnostics/care management**
- Planning and evaluation**

Yes

Processes are in place to ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme (R1.7)

Yes

Proposed transfer of current students to the programme under review

From your documentary analysis and your meeting with students, provide an evaluative summary to confirm how the Standards for prescribing programmes and Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers) will be met through the transfer of existing students onto the proposed programme

There are no existing students. This is a new programme.

Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to selection, admission and progression are met

No

There's no verification process in place for self-employed applicants who work

independently, and the programme team can't verify they will be supported and there are appropriate governance arrangements in place to develop them once qualified. PLPs are not aware of the application process for the programme. There's no process outlining how self-employed applicants are signed off as competent in diagnosis.

There's no evidence of a process sufficient to ensure equity of student experience and provide assurance practice experiences are safe, effective and inclusive. There are audit processes in place for pre-registration nursing programmes, but it is not clear what process will be used for applicants to the prescribing programme.

Whilst there's an intention to work with PLPs in partnership to provide the necessary support for students there's no evidence this is in place. There are no details how the programme team will prepare practice supervisors and practice assessors to support students in line with the SSSA.

Outcome

Is the standard met?

Not Met

There's no verification process in place for self-employed applicants who work independently, and the programme team can't verify they will be supported and there are appropriate governance arrangements in place to develop them once qualified. PLPs are not aware of the application process for the programme. There's no process outlining how self-employed applicants are signed off as competent in diagnosis.

Condition two: The AEI must provide details of admission processes and procedures and which support self-employed applicants applying for entry onto an NMC approved prescribing programme. (SFNME R2.3; SPP R1.2, R1.3)

There's no evidence of a process sufficient to ensure equity of student experience and provide assurance practice experiences are safe, effective and inclusive. There are audit processes in place for pre-registration nursing programmes but it isn't clear what process will be used for applicants to the prescribing programme.

Condition three: The AEI must provide details of the audit process and outline how this will be implemented for practice learning placements for NHS, non-NHS and self-employed applicants. (SFNME R2.13; SSSA R1.4, R1.10, R2.4, R2.5; SPP R1.3 R3.1, R3.2)

Whilst there's an intention to work with PLPs in partnership to provide the

necessary support for students there's no evidence this is in place. There are no details how the programme team will prepare practice supervisors and practice assessors to support students in line with the SSSA.

Condition four: The AEI must provide details of the schedule and programme of preparation for practice assessors and practice supervisors which ensures these individuals are suitably prepared to support applicants to the prescribing programme (SFNME R2.4, R2.5, R2.14; SSSA R5.1, R6.7, R8.1; SPP R1.3, R3.2, R4.2)

Date: 22 February 2020

Post Event Review

Identify how the condition is met:

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

N/A

Standard 2 Curriculum

Approved education institutions, together with practice learning partners, must:

R2.1 ensure programmes comply with the NMC Standards framework for nursing and midwifery education

R2.2 ensure that all prescribing programmes are designed to fully deliver the competencies set out in the RPS A Competency Framework for all Prescribers, as necessary for safe and effective prescribing practice

R2.3 state the learning and teaching strategies that will be used to support achievement of those competencies

R2.4 develop programme outcomes that inform learning in relation to the formulary relevant to the individual's intended scope of prescribing practice:

R2.4.1 stating the general and professional content necessary to meet the programme outcomes

R2.4.2 stating the prescribing specific content necessary to meet the programme outcomes

R2.4.3 confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist community public health nursing

R2.5 ensure that the curriculum provides a balance of theory and practice learning, using a range of learning and teaching strategies

R2.6 ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language

Evidence provides assurance that the following QA approval criteria are met

There is evidence that the programme complies with the NMC Standards framework for nursing and midwifery education (R2.1)

No

R2.1 is not met. There's no evidence of PLP partnership involvement with shared responsibility for theory and practice supervision, learning and assessment, including lines of communication and accountability for programme development, delivery, quality assurance and evaluation. (Condition one) (SFNME R1.12; SPP R2.1)

There's no evidence confirming how EU and PLPs share responsibility for theory and practice supervision, learning and assessment. This includes lines of communication and accountability for the development, delivery, quality assurance and evaluation of the prescribing programme. (Condition five) (SFNME R2.5; SPP R2.1, R4.1, R4.2)

There's no comprehensive student facing documentation providing essential information on all aspects of completing the programme. (Condition six) (SFNME R3.2; SPP R2.1)

There is evidence that the programme is designed to fully deliver the competencies set out in the RPS Competency Framework for all Prescribers, as necessary for safe and effective prescribing practice (R2.2).

Yes

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

Evidence of the learning and teaching strategies that will be used to support achievement of those competencies (R2.3)

Met

R2.3 is met. The V300 programme will be delivered at Scottish credit and qualifications framework (SQCF) academic level 11 in a 40 credit module over a period of six months with eight days attendance at the university. The programme specification outlines programme structure, learning and teaching methods used in the prescribing programme which the programme team say are designed to support students to achieve the RPS competency framework for all prescribers and programme outcomes. Programme specifications are explicit and RPS competencies are mapped and assessed in the practice assessment documentation. The programme is open to nurses and allied health professionals and there's opportunity for inter-professional learning in the programme.

A variety of teaching and learning approaches are used to meet the needs of all students. A blended learning approach is used to deliver the programme and students will learn through e-learning, self-directed study and classroom-based activities. Case based scenario learning will take place in the classroom and within the clinical area to provide simulation-based learning related to the principles of pharmacology and actions of drugs. Students are required to complete a minimum of 90 hours of supervised practice to complete the RPS prescribing competencies.

Evidence of programme outcomes that inform learning in relation to the formulary relevant to the individual's intended scope of prescribing practice (R2.4):

-stating the general and professional content necessary to meet the programme outcomes

-stating the prescribing specific content necessary to meet the programme outcomes

-confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist community public health nursing

Yes

The programme structure demonstrates an equal balance of theory and practice learning. This is detailed in the designated hours in the module descriptors and practice learning allocations. A range of learning and teaching strategies are detailed in the programme specification, programme handbook and module descriptors with theory / practice balance detailed at each part of the programme and at end point. There are appropriate module aims, descriptors and outcomes specified. (R2.5)

Yes

If relevant to the review: Evidence to ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language. (R2.6)

N/A

This programme is only delivered in Scotland.

Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to curricula and assessment are met

No

There's no evidence of PLP partnership involvement with shared responsibility for theory and practice supervision, learning and assessment, including lines of communication and accountability for programme development, delivery, quality assurance and evaluation.

There's no evidence confirming how EU and PLPs share responsibility for theory and practice supervision, learning and assessment. This includes lines of communication and accountability for the development, delivery, quality assurance and evaluation of the prescribing programme.

There's no comprehensive student facing documentation providing essential information on all aspects of completing the programme.

Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to curricula and assessment are met

Yes

Outcome

Is the standard met?

Not Met

There's no evidence of PLP partnership involvement with shared responsibility for theory and practice supervision, learning and assessment, including lines of communication and accountability for programme development, delivery, quality assurance and evaluation.

Condition one: The AEI must provide a strategy and implementation plan to ensure recruitment, ongoing development, delivery and evaluation of the programme is co-produced with SUCs and other stakeholders. (SFNME R1.12; SPP R2.1)

There's no evidence confirming how EU and PLPs share responsibility for theory and practice supervision, learning and assessment. This includes lines of communication and accountability for the development, delivery, quality assurance and evaluation of the prescribing programme.

Condition five: The AEI must provide documentary evidence confirming practice learning partners adopt an approach with shared responsibility for quality theory and practice supervision, learning and assessment, including lines of communication and accountability for the development, delivery, quality assurance and evaluation of the prescribing programme. (SFNME R2.5; SPP R2.1, R4.1, R4.2)

There's no comprehensive student facing documentation providing essential information on all aspects of completing the programme.

Condition six: The AEI must provide a single comprehensive document that provides the essential information required to undertake the programme. (SFNME R3.2; SPP R2.1)

Date: 22 February 2020

Post Event Review

Identify how the condition is met:

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

N/A

Standard 3 Practice learning

Approved education institutions must:

R3.1 ensure that suitable and effective arrangements and governance for practice learning are in place for all applicants including arrangements specifically tailored to those applicants who are self-employed

Approved education institutions, together with practice learning partners, must:

R3.2 ensure that practice learning complies with the NMC Standards for student supervision and assessment

R3.3 ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment

R3.4 ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC Standards for student supervision and assessment

Evidence provides assurance that the following QA approval criteria are met

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

Evidence to ensure that suitable and effective arrangements and governance for practice learning are in place for all applicants including arrangements specifically tailored to those applicants who are self-employed (R3.1).

Not Met

R3.1 is not met. EU can't provide explicit details of how the audit processes will be

applied to non-NHS practice placements and self-employed applicants. (Condition three) (SFNME R2.13; SSSA R1.4, R1.10, R2.4, R2.5; SPP R1.3, R3.1, R3.2)

There are intentions to ask these applicants to self-audit with a percentage of these practice placements being audited by the programme lead. The self-audit process is not provided by the programme team. No details of percentages to be reviewed following any self-audit process are provided. The team are not able to tell us why there's a different process for auditing NHS and non-NHS placements. PLPs tell us they don't know how prescribing placements are audited to meet standards. Students can't tell us about any formal processes or guidance they receive to provide feedback about practice placements for the programme team. No issues of concern are raised by system regulators in respect of this institution or programme.

There is evidence that the programme complies with the NMC Standards for student supervision and assessment (R3.2)

No

R3.2 is not met. Documentary evidence and discussion at the visit does not provide assurance as to how practice assessors and practice supervisors are prepared for their roles or how they will receive ongoing support. EU can't provide details of materials used to prepare practice assessors and practice supervisors or say how they will monitor their level of preparedness. (Condition four) (SFNME R2.4, R2.5, R2.14; SSSA R5.1, R6.7, R8.1; SPP R1.3, R3.2, R4.2)

There's no timeline of scheduled preparation events or evidence of a strategy to identify future practice supervisors and practice assessors. The programme team tell us all practice supervisors and practice assessors are invited to a briefing session about the programme on day one of the programme but are unable to provide any detail about briefing session contents. It isn't evident what will happen if practice supervisors or practice assessors do not attend. It is unclear if preparation is a one-off event or if individuals are required to undertake on going update.

The programme team don't specify if medical practitioners need to undertake practice assessor preparation. Programme documentation includes a process outlining how medical practitioners evidence prior learning that means they don't have to undertake any preparation for the role of practice assessor. This doesn't provide sufficient assurance they are suitably prepared to support students on the prescribing programme and does not meet the SSSA. (Condition four) (SFNME R2.4, R2.5, R2.14; SSSA R5.1, R6.7, R8.1; SPP R1.3, R3.2, R4.2)

The practice learning environment quality tool given as an example relates to pre-registration nursing programmes and is not applicable to this programme. (Condition three) (SFNME R2.13; SSSA R1.4, R1.10, R2.4, R2.5; SPP R1.3, R3.1,

R3.2)

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

Evidence to ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment (R3.3)

Met

R3.3 is met. Documentary and narrative evidence from the approval visit demonstrates how technology enhanced and simulation-based learning opportunities are used within the programme. Technology enhanced and simulation-based learning opportunities are used effectively and proportionately. EU's virtual learning environment (VLE) is used to facilitate online tutorials, lectures, learning resources and research tools. This provides the main area for all student information which is accessed by students on the programme. The VLE contains a wide variety of resources including cases, lecture materials and other multi-media to aid learning. Students from other programmes tell us the VLE is easily accessed on and off campus. They say the VLE is excellent and supportive; it provides flexible learning opportunities. Pharmacology and numeracy examinations are to be completed at a timetabled date, under exam conditions. The practice assessment document is submitted digitally through an online portal.

Processes are in place to ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC Standards for student supervision and assessment. (R3.4)

Yes

Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to practice learning are met

No

The practice learning environment quality tool given as an example relates to pre-registration nursing programmes and is not applicable to this programme.

Documentary evidence and discussion at the visit do not provide assurance as to how practice assessors and practice supervisors are prepared for their roles or how they will receive ongoing support. EU can't provide details of materials used

to prepare practice assessors and practice supervisors or say how they will monitor their level of preparedness.

Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to practice learning are met

No

The practice learning environment quality tool given as an example relates to pre-registration nursing programmes and is not applicable to this programme.

Documentary evidence and discussion at the visit do not provide assurance as to how practice assessors and practice supervisors are prepared for their roles or how they will receive ongoing support. EU can't provide details of materials used to prepare practice assessors and practice supervisors or say how they will monitor their level of preparedness.

Outcome

Is the standard met?

Not Met

The practice learning environment quality tool given as an example relates to pre-registration nursing programmes and is not applicable to this programme.

Condition three: The AEI must provide details of the audit process and outline how this will be implemented for practice learning placements for NHS, non-NHS and self-employed applicants. (SFNME R2.13; SSSA R1.4, R1.10, R2.4, R2.5; SPP R1.3, R3.1, R3.2)

Documentary evidence and discussion at the visit do not provide assurance as to how practice assessors and practice supervisors are prepared for their roles or how they will receive ongoing support. EU can't provide details of materials used to prepare practice assessors and practice supervisors or say how they will monitor their level of preparedness.

Condition four: The AEI must provide details of the schedule and programme of preparation for practice assessors and practice supervisors which ensures these individuals are suitably prepared to support applicants to the prescribing programme. (SFNME R2.4, R2.5, R2.14; SSSA R5.1, R6.7, R8.1; SPP R1.3 R3.2, R4.2)

Date: 22 February 2020

Post Event Review

Identify how the condition is met:

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

N/A

Standard 4 Supervision and assessment

Approved education institutions, together with practice learning partners, must:

R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education

R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC Standards for student supervision and assessment

R4.3 appoint a programme leader in accordance with the requirements of the NMC Standards framework for nursing and midwifery education. The programme leader of a prescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience

R4.4 ensure the programme leader works in conjunction with the lead midwife for education (LME) and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes

R4.5 ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking

R4.5.1 In exceptional circumstances, the same person may fulfil the role of practice supervisor and practice assessor for that part of the programme where the prescribing student is undergoing training in a practice learning setting. In such

instances, the student, practice supervisor/assessor and the AEI will need to evidence why it was necessary for the practice supervisor and assessor roles to be carried out by the same person

R4.6 ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking

R4.7 provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes

R4.8 assess the student's suitability for award based on the successful completion of a period of practice based learning relevant to their field of prescribing practice

R4.9 ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies. This includes all students:

R4.9.1 successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), and

R4.9.2 successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100%).

Evidence provides assurance that the following QA approval criteria are met

There is evidence of how the programme will ensure how support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education. (R4.1)

Not Met

R4.1 is not met. There's an intention to audit practice learning environments used for the V300 programme. However, the programme team can't say how this is to be used. The programme team tell us they intend to use an audit tool and this will be completed by employers and service managers. The team has not provided this tool for scrutiny. There's no evidence of process sufficient to ensure equity of student experience and give assurance that practice experience is safe, effective and inclusive. As such, there's no evidence of a process to assess a practice placement's suitability or mechanisms in place to identify contingencies if a practice placement is found to be unsuitable. (Condition five) (SFNME R2.5; SPP R2.1, R4.1, R4.2)

Students tell us they're supported by EU on their post-graduate programmes. Documentary evidence gives details of the raising concerns process in the form of

flowcharts. Students tell us they understand and have access to the procedure for raising a concern in the university and in practice learning environments on other similar programmes.

PLPs tell us they have processes in place to support students in raising such concerns. They describe effective communications established with the EU academic team on other NMC programmes. There's documentary evidence for processes concerning fitness to practise. There's documentary evidence confirming how practice assessors and academic assessors should communicate during the prescribing programme. PLPs can't confirm this but agree in principle to the timelines and methods outlined in the practice assessment document.

There is evidence of how the Standards for student supervision and assessment are applied to the programme. There are processes in place to identify the supervisors and assessors along with how they will be prepared for their roles. (R4.2)

Not Met

R4.2 is not met. There are processes in place to identify practice supervisors and practice assessors in the application process. However, there is no information on how they will be prepared for their roles or subsequently identified. No detail of the preparation of practice supervisors or practice assessors is provided and PLPs tell us they aren't given information outlining the schedule of preparation, or details of that preparation, in regards to the prescribing programme. There's no evidence to assure us there'll be any suitably prepared practice supervisors or practice assessors in place to adequately support students prior to the programme starting. (Condition four) (SFNME R2.4, R2.5, R2.14; SSSA R5.1, R6.7, R8.1; SPP R1.3, R3.2, R4.2)

The programme team tell us how they will allocate the academic assessor and only give this role to academic staff who have appropriate professional and clinical expertise. This expertise will include holding an NMC prescribing qualification. They confirm preparation for this role will occur but there's no documentary evidence detailing the form this preparation will take in relation to the V300 programme.

From the evidence given at the approval visit there's no assurance students in practice will be adequately supported to learn. There's no process in place to assure us students will be supervised and assessed by suitably qualified individuals. Students involved in the approval visit are unable to comment about the roles of practice supervisor, practice assessor or academic assessor with regards to this programme. PLPs and students tell us they are not involved in the development of this programme. There's no evidence of PLPs being involved in a partnership with EU to share responsibility for theory and practice supervision, learning and assessment, including lines of communication and accountability for the development, delivery, quality assurance and evaluation of the prescribing

programme. (Condition five) (SFNME R2.5; SPP R2.1, R4.1, R4.2)

Evidence of programme leader being a registered healthcare professional with appropriate knowledge, skills and experience (R4.3)

Yes

Evidence of the programme leader working in conjunction with the LME and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes (R4.4)

No

The programme is not offered to midwives at EU. There is no lead midwife for education (LME) in place and there are no other arrangements in place to support midwives to undertake this programme.

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

Processes are in place to ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking (R4.5)

Met

R4.5 is met. Documentary evidence confirms there's guidelines and processes in place to assign each student a practice assessor who is a registered healthcare professional and an experienced prescriber prescribing in the same field of practice as the student. The application process provides evidence students identify their practice assessor prior to commencement. The practice supervisor and practice assessor handbook contains definitions outlining the experience and qualifications required for practice assessors in the V300 programme. However, PLPs at the approval visit tell us they're not aware of the application process for this programme. There's a process for managing exceptional circumstances where the same person fulfils practice supervisor and practice assessor roles. The programme team say this is identified at the point of application and closely monitored by the programme lead. The proposed timeline for liaison between academic assessor and practice assessor is detailed in student facing practice assessment documentation. The academic assessor and practice assessor have scheduled communications about a student, as a minimum, at commencement, the mid-point and at the end of the programme.

Processes are in place to ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking (R4.6)

Yes

Processes are in place to provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes (R4.7)

Yes

Processes are in place to assess the student's suitability for award based on the successful completion of a period of practice based learning relevant to their field of prescribing practice (R4.8)

Yes

Processes are in place to ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies (R4.9). This includes:

- successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), and**
- successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100%)**

Yes

Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to supervision and assessment are met Please provide narrative for any exceptions

No

There's no evidence to assure us there will be any suitably prepared practice supervisors or practice assessors in place to adequately support students prior to the programme starting.

There's no evidence of PLPs being involved in a partnership with EU to share responsibility for theory and practice supervision, learning and assessment, including lines of communication and accountability for the development, delivery, quality assurance and evaluation of the prescribing programme.

Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to supervision and assessment are met Please provide narrative for any exceptions

No

There's no evidence to assure that there will be any suitably prepared practice supervisors or practice assessors in place to adequately support students prior to the programme starting.

Outcome

Is the standard met?

Not Met

There's no evidence to assure us that there will be any suitably prepared practice supervisors or practice assessors in place to adequately support students prior to the programme starting.

Condition four: The AEI must provide details of the schedule and programme of preparation for practice assessors and practice supervisors which ensures these individuals are suitably prepared to support applicants to the prescribing programme. (SFNME R2.4, R2.5, R2.14; SSSA R5.1, R6.7, R8.1; SPP R1.3, R3.2, R4.2)

There's no evidence of PLPs being involved in a partnership with EU to share responsibility for theory and practice supervision, learning and assessment, including lines of communication and accountability for the development, delivery, quality assurance and evaluation of the prescribing programme.

Condition five: The AEI must provide documentary evidence confirming practice learning partners adopt an approach with shared responsibility for quality theory and practice supervision, learning and assessment, including lines of communication and accountability for the development, delivery, quality assurance and evaluation of the prescribing programme. (SFNME R2.5; SPP R2.1, R4.1, R4.2)

Date: 22 February 2020

Post Event Review

Identify how the condition is met:

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

N/A

Standard 5 Qualification to be awarded

Approved education institutions, together with practice learning partners, must:

R5.1 following successful completion of an NMC approved programme of preparation, confirm that the registered nurse (level 1), midwife or SCPHN is eligible to be recorded as a prescriber, in either or both categories of:

R5.1.1 a community practitioner nurse or midwife prescriber (V100/V150), or

R5.1.2 a nurse or midwife independent/supplementary prescriber (V300)

R5.2 ensure that participation in and successful completion of an NMC approved prescribing programme leads to accreditation at a level equivalent to a bachelor's degree as a minimum award

R5.3 inform the student that the award must be registered with us within five years of successfully completing the programme and if they fail to do so they will have to retake and successfully complete the programme in order to qualify and register their award as a prescriber

R5.4 inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice

Evidence provides assurance that the following QA approval criteria are met

Processes are in place to ensure following successful completion of an NMC approved programme of preparation, confirm that the registered nurse (level 1), midwife or SCPHN is eligible to be recorded as a prescriber, in either or both categories of:

- a community practitioner nurse (or midwife) prescriber (V100/V150), or
- a nurse or midwife independent/supplementary prescriber (V300) (R5.1)

Yes

Evidence to ensure that successful participation in and completion of an NMC approved prescribing programme leads to accreditation at a level equivalent to a bachelor's degree as a minimum award (R5.2)

Yes

Processes are in place to inform the student that the award must be registered with the NMC within five years of successfully completing the programme and if they fail to do so they will have to retake and successfully complete the programme in order to qualify and register their award as a prescriber (R5.3)

Yes

Processes are in place to inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice (R5.4)

Yes

Assurance is provided that the Standards framework for nursing and midwifery education relevant to the qualification to be awarded are met

Yes

Outcome

Is the standard met?

Met

Date: 22 February 2020

Post Event Review

Identify how the condition is met:

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

N/A

Section four

Source of evidence

The following documentation provided by the AEI/education institution was reviewed by the visitor(s):

Key documentation	Yes/No
Programme document, including proposal, rationale and consultation	Yes
Programme specification(s)	Yes
Module descriptors	Yes
Student facing documentation including: programme handbook	Yes
Student university handbook	Yes
Practice assessment documentation	Yes
Practice placement handbook	Yes
PAD linked to competence outcomes, and mapped against RPS A Competency Framework for all Prescribers	Yes
Mapping document providing evidence of how the education institution has met the Standards framework for nursing and midwifery education (NMC, 2018)	Yes
Mapping document providing evidence of how the programme meets the Standards for prescribing programmes and RPS Standards of proficiency for prescribers (NMC, 2018)	Yes
Mapping document providing evidence of how the Standards for student supervision and assessment (NMC, 2018) apply to the programme(s)	Yes
Curricula vitae for relevant staff	Yes
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website	Yes
Written confirmation by the education institution and associated practice learning partners to support the programme intentions	No
List additional documentation:	
None provided.	
If you stated no above, please provide the reason and mitigation	
There is no written contract or memorandum of understanding in place to support the programme. The application form is the only written confirmation of support as it is signed by PLPs and line managers prior to commencing the prescribing programme. PLPs at the approval visit are not aware of the application process for this programme. This is addressed in condition five.	
Additional comments:	

During the visit the visitor(s) met the following groups	Yes/No
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Senior managers of the AEI/education institution with responsibility for resources for the programme	Yes
Senior managers from associated practice learning partners with responsibility for resources for the programme	Yes
Programme team/academic assessors	Yes
Practice leads/practice supervisors/ practice assessors	Yes
Students	Yes
If yes, please identify cohort year/programme of study:	
No students from a prescribing programme attended the visit. Two students from year one of the MSc advanced nursing programme 2019/20.	
Service users and carers	Yes
If you stated no above, please provide the reason and mitigation	
Additional comments: Two practice facilitators attended this visit. They are not yet prepared for roles in line with the SSSA.	

The visitor(s) viewed the following areas/facilities during the visit:	Yes/No
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	No
Library facilities	No
Technology enhanced learning / virtual learning environment	No
Educational audit tools/documentation	No
Practice learning environments	No
If yes, state where visited/findings:	
If you stated no above, please provide the reason and mitigation	
EU is an established AEI. Viewing these facilities not required.	
No current audit documentation relating to the prescribing programme produced at the visit.	
Additional comments:	

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We accept no responsibility for the consequences of this document being relied

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Issue record

Final Report

Author	Mark Lovatt	Date	23 February 2020
Checked by	Monica Murphy	Date	2 April 2020
Submitted by	Leeann Greer	Date	15 April 2020
Approved by	Helen Shapcott	Date	16 April 2020